

Please type a plus sign (+) inside this box

PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
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**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 42390P13912

First Inventor Gregory C. Parrish

Title METHOD, APPARATUS, AND SYSTEM FOR EFFICIENT TESTING

Express Mail Label No. EL414998239US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 14]
(preferred arrangement set forth below)
- Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
5. Oath or Declaration [Total Pages _]
a. ☐ Newly executed (original or copy)
b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 18 completed)
i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
- a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: _____

Prior application Information: Examiner: _____

Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

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(503) 684-6200

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Name (Print/Type) Donna Jo Coningsby

Registration No. (Attorney/Agent) 41,684

Signature

Donna Jo Coningsby

Date 02/26/02

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2002</h3> <p style="margin: 0; font-size: small;">Patent fees are subject to annual revision.</p>		<p style="margin: 0; font-size: small;">Complete if Known</p>													
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td style="width: 50%;"></td> </tr> <tr> <td>Filing Date</td> <td>February 26, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Gregory C. Parrish</td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Group/Art Unit</td> <td></td> </tr> <tr> <td>Attorney Docket No.</td> <td>42390P13912</td> </tr> </table>		Application Number		Filing Date	February 26, 2002	First Named Inventor	Gregory C. Parrish	Examiner Name		Group/Art Unit		Attorney Docket No.	42390P13912
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TOTAL AMOUNT OF PAYMENT	(\$)	740.00													

<h4 style="text-align: center; margin: 0;">METHOD OF PAYMENT (check one)</h4> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p><input type="checkbox"/> Deposit Account</p> <p>Deposit Account Number: 02-2666</p> <p>Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP</p> <p style="font-size: small;">The Commissioner is authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments </p> <p> <input type="checkbox"/> Charge any additional fee(s) during the pendency of the application </p> <p> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account </p> <h4 style="text-align: center; margin: 0;">FEE CALCULATION</h4> <h5 style="margin: 0;">1. BASIC FILING FEE</h5> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370</td> <td>Utility filing fee</td> <td rowspan="5" style="text-align: center; vertical-align: middle;">740.00</td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165</td> <td>Design filing fee</td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255</td> <td>Plant filing fee</td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370</td> <td>Reissue filing fee</td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80</td> <td>Provisional filing fee</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td></td> <td style="text-align: center;">740.00</td> </tr> </tbody> </table> <h5 style="margin: 0;">2. EXTRA CLAIM FEES</h5> <p> Total Claims: 20 - 20* = 0 x 18.00 = \$0.00 Independent Claims: 3 - 3* = 0 x 84.00 = \$0.00 Multiple Dependent: = </p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td rowspan="5" style="text-align: center; vertical-align: middle;">0.00</td> </tr> <tr> <td>102</td> <td>84</td> <td>202</td> <td>42</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>104</td> <td>280</td> <td>204</td> <td>140</td> <td>Multiple Dependent claim, if not paid</td> </tr> <tr> <td>109</td> <td>84</td> <td>209</td> <td>42</td> <td>**Reissue independent claims over original patent</td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (2)</td> <td></td> <td style="text-align: center;">0.00</td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater, For Reissues, see below</p>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	101	740	201	370	Utility filing fee	740.00	106	330	206	165	Design filing fee	107	510	207	255	Plant filing fee	108	740	208	370	Reissue filing fee	114	160	214	80	Provisional filing fee	SUBTOTAL (1)					740.00	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	103	18	203	9	Claims in excess of 20	0.00	102	84	202	42	Independent claims in excess of 3	104	280	204	140	Multiple Dependent claim, if not paid	109	84	209	42	**Reissue independent claims over original patent	110	18	210	9	**Reissue claims in excess of 20 and over original patent	SUBTOTAL (2)					0.00	<h4 style="text-align: center; margin: 0;">FEE CALCULATION (continued)</h4> <h5 style="margin: 0;">3. 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Name (Print/Type)	Donna Jo Coningsby	Registration No. (Attorney/Agent)	41,684
Signature		Telephone	(503) 684-6200
		Date	02/26/02

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